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ABSTRACT

The Children's Perception of Support Inventory (CPSI) which assesses the extent to which children perceive their families and peer networks as understanding, responsive, and supportive is described. This measure was constructed (1) to differentiate children on family and peer-support scales and to demonstrate the relationship between the perception of support and help-seeking behavior, and (2) to investigate whether a child's perception of support from family and peers changes with age. The means for selecting the CPSI items is detailed: three independent measures were reviewed, five judges determined how appropriately each of 100 items characterized children's help-seeking behavior following a crisis, and the experts' judgments were used to compile the CPSI. The 45 items selected measure the extent to which children perceive their families as helpful and supportive, the degree to which friends are perceived to give support, and the extent to which children believe external or internal factors control their lives. Directions for scoring the measure are provided, and psychometric procedures used to establish reliability and validity are described. Norms for age groups, as well as a guide for interpreting results, are given. (Author/DB)

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Children's Perception of Support Inventory

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Within recent years a psycho-social model of problem solving has been proposed(Caplan, 1964); the purpose of such a model has been to identify both the internal and external factors associated with crisis resolution. According to the theory, one of the most effective means of interpersonal problem solving is the ability to utilize available "helpers" during times of life crises. These "helping agents" have been popularized in the literature as "support systems."

Initially, the idea of support systems emerged from research on individual responses to life crises(Caplan, 1964). Caplan was able to repeatedly demonstrate that the outcome of a crisis was influenced not only by the nature and vicissitudes of the stress and by the current ego strength of the individual, but, most importantly, by the quality of the emotional support and assistance provided by the social network within which that individual grapples with the crisis event. Further. Cobb(1976) has suggested that social support begins in utero and, as life progresses, is derived increasingly from other members of the family, from peers at school and work, and perhaps, in the case of special needs, from members of the helping professions. It is this information leading the subject to believe that he is cared for and loved, esteemed and a member of a network with mutual obligations which facillitates coping and adaptation to change. Therefore, the presence of supportive social bonds. under conditions of high stress, seems to decrease the susceptibility to breakdown under the pressure of crisis(Gourash, 1978; Gurin, Veroff, & Feld, 1960).

Most of the work on support systems has been descriptive in nature and identifies either the relative contributions of various significant others

(family, friends, neighbors) during an adults confrontation with a life crisis or studies the important psychological and sociological variables associated with help seeking behavior(Erickson, 1975; Lieberman & Glidewell et al., 1978; Tolsdorf, 1976). Such variables as the life stage of the individual(Schulman, 1975), the level of psychological adjustment(Tolsdorf, 1976); the availability of support(Brown, 1978); the type of crisis experienced (Young & Ferguson, 1979); the degree of perceived stress(Brown, 1978) and the perception of support within individual sectors(Brown 1978; Rosen, 1979) have been shown to be important in determining the success and direction of crisis resolution through support utilization.

Unfortunately, because adults are less capable of identifying those events in a child's life which are upsetting, there has been little research examining the types of crises a child experiences(Coddington, 1976), and even less identifying where, and under what conditions, a child might secure help.

The present study represents an attempt to examine one such factor associated with help seeking behavior, children's perceptions of support. Previous research with adult populations has demonstrated that both psychiatric patients(Tolsdorf, 1976) as well as adults at risk following life crisis(Brown, 1979) report having a generally negative orientation toward their network, report fewer intimate relationships with their network members, and tend not to utilize potential resources for help. In addition, such individuals with unsupportive and unreliable informal networks report ineffective coping repertoires and low self esteem. This research suggests that the perception of support plays a significant role in the extent to which adults solicit the support of others during times of crisis.

Few researchers have examined this relationship betwen perception of support and help seeking behavior in child populations. One such study demonstrated that children who perceive their families as understanding and supportive report turning more often to family members during crisis than children who perceive low family support. In contrast, children who perceive their families as unsupportive are more likely to solve problems by not seeking help from anyone. This finding is in agreement with previous research which found parental influence the greatest when the quality of the parent-child relationship, as measured by the perception of parental interest, understanding, and support was high(Larson, 1970). Therefore, one might conclude that the more receptive, empathic, and supportive a network is, the more likely children will be to draw on these people in times of crisis.

The Children's Perception of Support Inventory(CPSI) is a measure which assesses the extent to which children perceive their family and peer networks as understanding, responsive, and supportive. The purpose of constructing this measure is twofold: 1)to differentiate children on family and peer support scales and to demonstrate the relationship between the perception of support and help seeking behavior, and 2)to investigate whether a child's perception of support from family and peers changes with age.

ITEM SELECTION

Initially, a total of 100 items were chosen from three independent sources. The first source consisted of fifty items chosen from a self report measure designed to assess children's perceptions of parental and sibling behavior(Schaefer, 1965). Secondly, twenty items were selected from a previously constructed scale measuring children's locus of control (Nowicki & Strickland, 1973). Items from each of these measures were selected specifically on the basis of content and their relationship to the construct of perception of support. The third source of items was chosen from responses to a series of sixteen hypothetical crisis situations in which children were asked to report who they would talk to concerning interpersonal problems as well as what factors were important in choosing certain people for support(Rosen, 1979). Thirty characteristics important in perceiving support from others were identified and included in the final list of 100 items. This list served as the pool from which the final list of items were chosen.

The second step towards the development of the measure involved having ten graduate clinical psychology students rank the items on a scale(1-5), ranging from very appropriate to inappropriate. Students were asked to rate each item as it related to children's perception of support and potential help seeking behavior. Specifically, raters were asked "which characteristics are important in children deciding to seek the help of others following crisis." Means for each item were calculated. All items with a mean score of four or more were included in the final list of items.

The final list of items included fourty-five self statements from each of three scales. The first scale, perception of family support, consists of twenty-three items, measuring the extent to which children

perceive their family as helpful and supportive. The second scale, labeled as perception of peer support, consists of fourteen items, and measures the degree of support perceived from friends. Eight items comprised the third scale, all of which were selected from the Nowicki-Strickland Locus of Control Scale for Children. These items measure the extent to which children believe events are controlled by either luck, chance, or fate or are contingent upon the child's own behavior and his own relatively permanent characteristics. It was hypothesized that scores on this internal-external locus of control continum would relate significantly to children's ability and tendency to seek help, when necessary. Items were worded in the positive and negative direction equally and children were asked to answer each question either by placing a mark in the column "like me" or "unlike me."

DIRECTIONS FOR SCORING

The CPSI asks a child to indicate on a "like me-unlike me" dichotomous variable how well each of the fourty-five self statements describes himself. On the basis of his responses, each child receives three major scores: a perception of family support score, a perception of peer support score, and, most important, a total perception of support score. In addition, a problem solving orientation score can also be computed.

The perception of family and peer support scores indicate the extent to which a child views his family and peer relationships as positive, supportive, and generally responsive to his needs. Each item is scored 0 or 1; 0 indicating poor relations and/or low perception of support, 1 indicating positive family/peer relations and high perception of support.

It should be noted that scores on these two scales are not independent of one another. Two hypotheses have been suggested which attempt to explain this interdependence. First, the development of positive family relations may provide the groundwork for the development of healthy peer relationships. As a result, children who perceive high family support may also be likely to develop good friendships, turning to both in times of crisis. Second, depending upon the age of the child, children differ in their general orientation towards family and peers. Specifically, research has indicated that around the age of 10, children begin to make the transition away from family and towards peers as the major source of support and identification(Bowerman, 1959; Rosen, 1979). With this in mind, one might also expect a similar shift in children's perception of support. Therefore, it is important to examine both the perception of family and peer support as a function of age as well as the relationship between these two support variables.

The total perception of support score is comprised of scores from both family and peer support scales as well as the problem solving scale which attempts to measure a child's willingness to seek support. All three scores are determined by summing the number of items a child identifies in the positive direction. The maximum score on family support is 23, on peer support 14, and on total support 45.

SUBJECTS AND ADMINISTRATION

During the fall of 1979, the CPSI was administered to 77 female and 71 male students at the Falk Laboratory School, University of Pittsburgh. Subjects ranged in age from seven to thirteen. The data that these students provided represent the normative data for the CPSI, and serve as the basis

for all the analyses that follow.

The CPSI was group administered in each of eight classrooms. Subjects were told that we were interested in how children get along with other people and that they should answer our exercise as it relates to themselves, their family, and their friends. The concept of confidentiality was explained and all children were asked to identify themselves by placing a number on their answer sheet.

PSYCHOMETRIC ANALYSES

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Internal Consistency

In order to estimate the internal consistency of the CPSI, coefficient alpha was computed separately for the Perception of family, peers, and total perception scores of the subjects. The results showed all three scores to be highly reliable(family support =.78; peer support =.77; total perception of support =.85).

In addition, correlations between each item and the total scale without the item were used as additional criteria for the final item selection as well as a test for internal consistency(See Table 1).

Relationship between perception of family and peer support

As indicated earlier, previous research has suggested that the perception of family and peer support are related in some unknown way and that changes in one area of support should affect changes in the other. To test this interrelationship, correlations were performed between family and peer support as a function of age(8,9 yrs. r =.44; 10,11yrs. r =.56; 12,13,14 yrs. r =.43). These results provide correlational evidence suggesting a somewhat positive relationship between family and peer support(i.e. that is, the perception of support from these two networks are not independent of one another.

Test-retest reliability

The CPSI was administered for a secondtime to fifteen males and fifteen females selected randomly across all age groups. The second administration took place approximately five weeks after the first. During this second administration subjects were asked to complete the questionaire without trying to remember how they had responded previously. Product-moment correlations

	Corrected Item-Total Correlation
V1	0.33135
V2	0.19491
V3	0.15111
V4	0.24995
V5	0.31278
V6	0.37175
V7	0.38302
V8	0.51698
V9	0.25472
V10	0.29271
V11	0.20228
V12	0.37962
V13	0.11192
V14	0.37600
V15	0.26234
V16	0.29253
V17	0.35849
V18	0.14086
V19	0.28494
V20	0.31517
V21	0.36670
V22	0.23888
V23	0.25128
V24	-0.44170
V25	-0.57244
V26	0.28710
V27	0.37365
V28	-0.47204
V29	-0.05823
V30	0.27741
V31	0.27008
V32	0.24300
V33	0.26096
V34	0.37547
V35	0.43009
V36	0.28420
V37	0.30888
V38	0.37990
V39	0.49878
V40	-0.47075
V41	-0.42074
V42	0.21818
V43	-0.43675
V44	0.37305
V45	0.32822

were computed between the first and second administrations for the perception of family, peer, and total perception of support scores. All three scores proved to be reliable over the five week interval with the perception of peer support somewhat less reliable than theother two scores(family support r=.81; peer support r=.64; total support r=.77).

Validity

As a measure of validity, twentysubjects were given a series of sixteen hypothetical crisis vignettes commonly occurring in late childhood and adolescence (Rosen, 1979). Subjects were asked who they would talk to if the problem had happened to them. The total number of family members and peers selected across the sixteen crisis situations was calculated. Pearson product moment correlations were calculated between family support and the number of times family members were chosen and peer support andthe number of times peers were selected. The correlation between family support and family members chosen was r=.64, whereas the correlatidn between peer support and peers selected was somewhat lower(r =.46). Even though these correlations suggest a strong positive relationship between perception of support and reports of help seeking behavior, it seems that the strength of the relationship depends, in part, on the network from which support is solicited. In addition, due to the problems inherent in self report data, one can only conclude that a positive relationship exists between children's perception of support and their thoughts concerning how they might respond in hypothetical crisis situations. Further research examining how children behave in real life problem situations will shed further light on what seems to be a strong positive relationship between perception of support and help seeking behavior.

Norms

Table 2 presents the means and standard deviations of the perception of family, peer, and total support across the three age categories(7,8,9--10,11,--12,13,14). Student Neuman-Keuls post hoc comparisons indicate no significant difference in the perception of family support as it relates to age. Similar post hoc comparison tests show that children comprising the two youngest age groups(8,9-10,11) differ significantly from the oldest group(12,13,14years) in their perception of peer support($p < .05$). The total perception of support increases with age as children in the youngest age category perceive significantly less support than children in the older two age groups($p < .05$). Certainly, the increase in the perception of peer support with age might account for this signficant difference.

Table 2

Means and standard deviations of the perception of family, peer, and total support score

Scale score	Age(years)		
Perception of family support	7,8,9	10,11	12,13,14
Mean	18.58	19.60	19.61
Standard deviation	3.25	3.59	3.13
Perception of peer support			
Mean	9.53	10.35	11.49
Standard deviation	2.72	2.80	2.41
Total perception of support			
Mean	33.07	35.73	36.85
Standard deviation	5.91	6.31	5.[illegible]

Normative Data

Family Support

Total Score	Frequency	Adjusted Percentage	Cumulative %
1	1	1	1
8	1	1	1
10	1	1	2
11	2	1	3
12	1	1	4
13	2	1	5
14	5	3	9
15	6	4	12
16	5	3	16
17	12	8	24
18	9	6	30
19	13	9	39
20	30	20	59
21	16	12	72
22	20	13	89
23	16	11	100

Peer Support

Total score	Frequency	Adjusted Percentage	Cumulative %
0	1	1	1
1	1	1	1
4	2	1	3
5	5	3	6
6	4	3	9
7	10	7	16
8	11	7	23
9	13	9	32
10	21	14	46
11	15	10	56
12	29	20	76
13	19	13	89
14	17	11	100

Total Perception of Support

Total Score	Frequency	Adjusted Percentage	Cumulative %
3	1	1	1
13	1	1	1
21	1	1	2
22	2	1	3
24	3	2	5
25	2	1	7
26	3	2	9
27	3	2	11
28	4	3	14
29	1	1	14
30	8	5	20
31	7	5	24
32	6	4	28
33	5	3	32
34	5	3	35
35	9	6	41
36	8	5	47
37	19	13	59
38	15	10	70
39	14	9	79
40	7	5	84
41	7	5	89
42	5	3	92
43	9	6	98
44	3	2	100

Interpretation

The CPSI is an assessment devise measuring children's perceptions of support from family members and peers. The higher a score on the family, peer, and total support scales, the more supportive a particular network is perceived. As a child's score reaches an extreme position relative to the normative group several interpretations are possible. On the one hand, if the score on a particular scale is extremely high, this would suggest that a child views his relationships within that network as positive, benevolent, supportive, and generally responsive to his needs. Furthermore, such a score would suggest the tendency towards an internal locus of control where the child believes that help, support, and assistance can be received through active effort and the solicitation of significant others. As a consequence, children with high support scores are likely to establish positive relations with their network members, drawing on them in times of crisis. During these times it is probable that seeking the support of others is an adaptive response to life stress and will, in part, decrease the susceptibility to breakdown.

On the other hand, if the score is extremely low then one might assume that the relationships within that network are not perceived by the child as generally positive, supportive, understanding, and receptive to the child's needs. In addition, a low score also reflects a child's tendency towards a more external locus of control, believing that problems may not be solved by soliciting the support of others. As a consequence, children with low family and peer support may be forced to seek approval, support, and affection elsewhere. Such an inadequate network of relationships may place these children at psychological risk, forcing them to either solve problems by themselves or turn to more socially inappropriate sources for support.

It remains to be demonstrated, however, that a relationship does exist

between a child's perception of support and his/her actual help seeking behavior. Nonetheless, one of the basic assumptions underlying this measure is the notion that children's perception of support is positively related to their actual help seeking behavior during crisis, and that the use of these suports is an adaptive, reality-based means toward effective crisis resolution.